PATER	NT APPLICATION Substitute	FEE DETERMINA for Form PTO-875	U.S. Palent and Trademark of pond to a collection of information un TION RECORD	d-for use through 7/31/2006. On Office: U.S. DEPARTMENT OF Mess it displays a valid OMB co Application or Pocket Num	COMM
1	CLAIMS AS FILED - I			10-000	™ ₹
-	(Column 1)				
FOR		(Column 2)	SMALL ENTITY	OR OTHER	THAN
BASIC FEE (37 CFR 1.15(a))	NUMBER FILED	NUMBER EXTRA	RATE EEE	SMALL ET	ALITY
TOTAL CLAIMS			TONTE FEE	RATE	FEE
(37 CFR 1.16(c)) INDEPENDENT CLAIMS	minus 20 =		-	OR ,	
(37 CFR 1.16(b))			X \$	OR X 1 =	==
MULTIPLE DEPENDENT CLA	minus 3 =	•	X s_ =	1· " \frac{\frac}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}}}}}}{\firac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac}\frac{\frac{\frac{\frac}}}}}}{\frac{\frac{\frac{\frac{\frac}}}}{\frac{\frac{\frac{\frac	
		R 1.16(d))		OR X S=	
* If the difference in column .	is less than zero, enter on	io only	J [] - -	OR + 5 =	
			TOTAL	OR TOTAL	
Q-17 55	AS AMENDED - PA	RTII		TOTAL	
0-12-06/10		olumn 2) (Column 3)			
	AIMS HIG	HEST	· SMALL ENTITY	OR OTHER THA	N
2 /8/7 (AF)	TER NU	MBER PRESENT OUSLY EXTRA	RATE ADDI-	SMALL ENTIT	ſΥ
Total (37 CFR 1.16(c))	Minus O	FOR	TIONAL		DDI-
Z Independent .	9 X	7 1-	x : 25 = FEE	FE FE	NAL EE
Total AMENI Total (37 CFR 1.16(b)) Independent (37 CFR 1.16(b))	Minus	3		OR . x : 50 =	
FIRST PRESENTATION OF A	AULTIPLE DEPENDENT CLAIM	(22.0%)	x : 100 =	OR x : 200=	
		(37 CFR 1.16(d))	+3/20=		
		•	TOTAL ADD'I FEE	TOTAL	
(Column CLAIM	COLUM	nn 2) (Column 3)		R ADD'L FEE	
REMAINI AFTER	NG HIGHE	ST PRESENT		<u></u>	
Total .		ISLY FXTRA	RATE ADDI- TIONAL	RATE ADDI-	
(31 CFR 1.16(c))	Minus "		FEE	TIONAL	
(37 CFR 1.16(b))	Minus ***		x : 25 = . OR	× :50 =	\dashv
FIRST PRESENTATION OF MUL	TIGUE OFF		× \$ 100=		
	THE DEPENDENT CLAIM (37 CFR 1.16(d))	+ s /BO= OR	x : 200=	$ \bot $
		_	TOTAL	+360=	
(Column 1)	(Column 2		ADD'L FEE OR	TOTAL ADD'L FEE	ij
CLAIMS REMAINING	HIGHEST			<u> </u>	-
AFTER AMENDMENT	NUMBER PREVIOUSL	PRESENT Y EXTRA	RATE ADDI-		4
Total *	Minus PAID FOR		TIONAL	RATE ADDI-	
dependent CFR 1.16(b))] =	25 = FEE	TIONAL FEE	
	Minus •••	1 1 -	OR	x \$ <u>50</u> =	1
RST PRESENTATION OF MULTIPL	E DEPENDENT CLAIM (37.0	50.440	100= OR	x : 200=	1
			180= OR	+360	1
ne entry in column 1 is less that the "Highest Number Previously to "Highest Number Previously	Π (he entry in and in the	TOT ADD	AL .	TOTAL	
the ettry in column 1 is less that the "Highest Number Previously e"Highest Number Previously Property of the structure of th	Paid For IN THIS SPACE	le "0" in column 3.	found in the appropriate box in colu	ADD'L'FEE	
Highoot At.	OU FOR IN THIS SPACE :	20" enter "20"	found in the appropriate box in colu		

The † fighest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this birden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.